PART B - FEE(S) TRANSMITTAL

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INSTRUCTIONS. This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate All interfler correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as made to including a separate "FEE ADDRESS" for maintenance fees will be mailed to the current correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fees will be mailed to the current correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fees of conference address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fees of conference address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fees will be mailed to the current correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fees will be mailed to the current correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fees will be mailed to the current correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fees will be mailed to the current correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fees will be mailed to the current correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fees will be mailed to the current correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fees will be mailed to the current correspondence address.

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24737 7	590 07/25	/2008						
PHILIPS INTEL P.O. BOX 3001 BRIARCLIFF MA	DARDS I	Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.						
							(Depositor's name)	
			Ī				(Signature)	
				(Date)				
APPLICATION NO.	FILING DATE		FIRST NAMED INVENT	ATTO		ORNEY DOCKET NO. CONFIRMATION NO.		
10/553,557	10/19/2005		Michelle Bonnin			R030041US1	4139	
TITLE OF INVENTION: LAMP FOR HEATING HAVING A REFLECTIVE FILM FOR TRANSMITTING DIFFERENT RADIATION PROTIONS								
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DU	E PREV. PAID ISSU	E FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1440	\$300	\$0		\$1740	10/27/2008	
EXAMINER		ART UNIT	CLASS-SUBCLASS					
WILLIAMS, JOSEPH L		2889	313-025000					
1. Change of correspondence address or indication of "Fee Address" (3 CFR 1.363). Change of correspondence address (or Change of Corresponden Address Form PTO/SB/12) attached. "Tee Address" indication (or "Fee Address" Indication form PTO/SB/12) are more recent) attached. Use of a Custom Number is required.			2. For printing on the patent front page, list (1) the annues of up to 3 registered patent attorneys or agents OR, alternatively, (2) the annue of a single firm (having as a member a registered patent autorneys or agent and the names of up to 2 registered patent autorneys or agent. If no name is inted, no name will be printed.					
3. ASSIGNE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PAITNY (gring or type) PLEASE NOTE: Lines an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE KONINKIP OF ASSIGN								
Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🚨 Corporation or other private group entity								
4a. The following fee(s) are	small entity discount p	permitted)	th. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) ☐ A check is enclosed. ☐ Payment by credit card. Form PTO-2038 is attached. ☐ Payment by credit card. Form PTO-2038 is attached. ☐ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 14-12/10 (enclose an extra copy of this form).					
 Change in Entity Status a. Applicant claims S 			☐ b. Applicant is no I	onger claiming SMA	LLENT	ITY status, See 37 CF	R 1.27(g)(2).	
NOTE: The Issue Fee and I	Publication Fee (if requ	ired) will not be accepte	d from anyone other tha					
Authorized Signature			· Onice	DateO	ctobe	er 24, 200	18	
Typed or printed name Eric M. Bram				Registration No. 37, 285				
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